

DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

COLLABORATIVE HOST MASQUERADING SYSTEM the specification of which (check one)

☒ is attached hereto
 was filed on _____ as Application _____
 and was amended on _____ (if applicable).
☒ I hereby authorize and request our attorney, Davidson, Davidson & Kappel, LLC, of 1140 Avenue of the Americas, New York, New York 10036 to insert here in parentheses (Application number _____, filed _____) the filing date and application number of said application when known.

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose all information which is known to me to be material to the patentability of this application as defined in Title 37, Code of Federal Regulations, §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign and/or provisional application(s) for patent or inventor's certificate listed below and have also identified below any foreign and/or provisional application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed.

PRIOR APPLICATION(S)

| | | | Priority claimed | |
|-------------------|---------------|------------------------|------------------|-------|
| <u>60/187,487</u> | <u>U.S.A.</u> | <u>07 March 2000</u> | <u>X</u> | |
| (Number) | (Country) | (Day/Month/Year Filed) | Yes | No |
| _____ | _____ | _____ | _____ | _____ |
| (Number) | (Country) | (Day/Month/Year Filed) | Yes | No |

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

| | | |
|-----------------------------|---------------|---|
| _____ | _____ | _____ |
| (Application Serial Number) | (Filing Date) | (Status) (patented, pending, abandoned) |
| _____ | _____ | _____ |
| (Application Serial Number) | (Filing Date) | (Status) (patented, pending, abandoned) |

And I hereby appoint Clifford M. Davidson, Registration No. 32,728, Leslye B. Davidson, Registration No. 38,854, Cary S. Kappel, Registration No. 36,561, William C. Gehris, Registration No. 38,156, Morey B. Wildes, Registration No. 36,968, Robert J. Paradiso, Registration No. 41,240, Scott L. Appelbaum, Registration No. 41,587, Cynthia R. Moore, Registration No. 46,086, David G. Knasiak, Registration No. 45,991, Salvatore J. Maiorino, Registration No. 42,830, my attorneys, with full power of substitution and revocation, to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith; correspondence address: DAVIDSON, DAVIDSON & KAPPEL, LLC, 1140 Avenue of the Americas, 15th Floor, New York, New York 10036; Telephone: (212) 997-1028; Fax: (212) 997-1037.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or first
 Inventor David L. RHODES
 Inventor's signature David L. Rhodes
 Date NOV. 10, 2000
 Residence 28 Meadow Point Drive, Brick, New Jersey 08723,
U.S.A.
 Citizenship U.S.A.
 Post Office Address: (same as above)

Full name of joint
 Inventor _____
 Inventor's signature _____
 Date _____
 Residence _____
 Citizenship _____
 Post Office Address: _____

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

| STATEMENT CLAIMING SMALL ENTITY STATUS (37 CFR 1.9(f) & 1.27(c))--SMALL BUSINESS CONCERN | | Docket Number (Optional) |
|---|--|--------------------------|
| Applicant, Patentee, or Identifier: <u>David L. Rhodes</u> | | |
| Application or Patent No.: <u>Initial provisional patent application</u> | | |
| Filed or Issued: <u>Filing</u> | | |
| Title: <u>Collaborative Host Masquerading to Maintain or Improve Lengthy or Time-Critical</u> <u>Inter-Network Packet-Based or Cell-based Transport</u> | | |
| I hereby state that I am <input checked="" type="checkbox"/> the owner of the small business concern identified below: <input type="checkbox"/> an official of the small business concern empowered to act on behalf of the concern identified below: | | |
| NAME OF SMALL BUSINESS CONCERN <u>OpCoast LLC, of New Jersey</u> | | |
| ADDRESS OF SMALL BUSINESS CONCERN <u>2530 Hooper Avenue, Brick, NJ 08723</u> | | |
| <p>I hereby state that the above identified small business concern qualifies as a small business concern as defined in 13 CFR Part 121 for purposes of paying reduced fees to the United States Patent and Trademark Office. Questions related to size standards for a small business concern may be directed to: Small Business Administration, Size Standards Staff, 409 Third Street, SW, Washington, DC 20416.</p> <p>I hereby state that rights under contract or law have been conveyed to and remain with the small business concern identified above with regard to the invention described in:</p> <p><input type="checkbox"/> the specification filed herewith with title as listed above. <input checked="" type="checkbox"/> the application identified above. <input type="checkbox"/> the patent identified above.</p> <p>If the rights held by the above identified small business concern are not exclusive, each individual, concern, or organization having rights in the invention must file separate statements as to their status as small entities, and no rights to the invention are held by any person, other than the inventor, who would not qualify as an independent inventor under 37 CFR 1.9(c) if that person made the invention, or by any concern which would not qualify as a small business concern under 37 CFR 1.9(d), or a nonprofit organization under 37 CFR 1.9(e).</p> <p>Each person, concern, or organization having any rights in the invention is listed below: <input checked="" type="checkbox"/> no such person, concern, or organization exists. <input type="checkbox"/> each such person, concern, or organization is listed below.</p> <p>Separate statements are required from each named person, concern or organization having rights to the invention stating their status as small entities. (37 CFR 1.27)</p> <p>I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))</p> <p>NAME OF PERSON SIGNING <u>David L. Rhodes</u></p> <p>TITLE OF PERSON IF OTHER THAN OWNER <u>28 Meadow Point Dr., Brick NJ 08723</u></p> <p>ADDRESS OF PERSON SIGNING <u>28 FEB 2000</u></p> <p>SIGNATURE <u>David L. Rhodes</u> DATE <u>28 FEB 2000</u></p> | | |

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.